United Nations DP/2004/13

Executive Board of the United Nations Development Programme and of the United Nations Population Fund

Distr.: General
11 December 2003

Original: English

First regular session 2004
23 to 30 January 2004, New York
Item 9 of the provisional agenda
Follow-up to UNAIDS Programme Coordinating Board meeting

UNDP follow-up to the UNAIDS Programme Coordinating Board meeting*

Summary

The present document introduces the key decisions, recommendations and conclusions of the Fourteenth Meeting of the Programme Coordinating Board of the Joint United Nations Programme on HIV/AIDS (UNAIDS), and provides the UNDP response and implementation of Programme Coordinating Board recommendations. The document also outlines key areas of UNDP HIV/AIDS work in accordance with areas highlighted by the Programme Coordinating Board.

The key decisions, recommendation and conclusions adopted by the Fourteenth Meeting of the UNAIDS Programme Coordinating Board are contained in the report of the Fourteenth Meeting of the Programme Coordinating Board of UNAIDS (UNAIDS/PCB(14)/03.8) available on the UNAIDS web site at www.unaids.org.

* The collection of data required to present the Executive Board with the most current information has delayed submission of the present document.

03-65218 (E) 121203 121203

Context

1. The Executive Boards of UNDP/UNFPA, the United Nations Children's Fund (UNICEF) and the World Food Programme (WFP) held a joint session on 6 June 2003 to address the recommendations of the five-year evaluation of the Joint United Nations Programme on HIV/AIDS (UNAIDS) contained in document UNAIDS/PCB(13)/02.2. The joint session discussed the implications of the recommendations for UNDP, UNFPA, UNICEF and WFP, and covered UNAIDS operational and governance issues.

2. Members of the Executive Board proposed that follow-up to the UNAIDS Programme Coordinating Board (PCB) meetings be placed as a regular item on the agenda of the Board. The Board suggested that this item be exceptionally taken up at its first regular session in January 2004.

Key areas highlighted at the Fourteenth Meeting of the UNAIDS Programme Coordinating Board

3. The Fourteenth Meeting of the UNAIDS Programme Coordinating Board was held from 26 to 27 June 2003 in Geneva, Switzerland. The PCB adopted a number of decisions, recommendation and conclusions. Key decisions that apply to UNDP work focused on the following areas:

- Technical support at the country level;
- Assisting countries to access resources;
- Feminization of the epidemic;
- HIV/AIDS and food insecurity;
- Stigma, discrimination and marginalization;
- Leadership and political commitment;
- Multi-sectoral responses to HIV/AIDS;
- Support to communities and vulnerable groups;
- Asia and Pacific region;
- National capacity to coordinate and implement responses to HIV/AIDS;
- Results-based management framework;
- Scaling up national responses.

UNDP implementation of PCB recommendations

4. In order to reflect the PCB decisions and recommendations made following the five-year evaluation of UNAIDS, UNDP refined its corporate service lines on HIV/AIDS in 2003. On the basis of country experience, the service lines were consolidated from five to three services: (a) leadership and capacity development to address HIV/AIDS; (b) development planning, implementation and HIV/AIDS responses; and (c) advocacy and communication to address HIV/AIDS. The service

lines were incorporated into the UNDP second multi-year funding framework, 2004-2007 (DP/2003/32), and endorsed by the Executive Board in its decision 2003/24. UNDP activities have applied and reflected PCB recommendations accordingly.

Technical support at country level

5. UNDP has supported countries in meeting the goals and targets set out in the Declaration of Commitment on HIV/AIDS adopted by the General Assembly at its 26th Special Session on HIV/AIDS in June 2001 in resolution A/RES/S-26/2. The leadership development programmes – in Cambodia, Ethiopia, Ghana, Haiti, Malaysia, Nepal, Senegal, South Africa, Swaziland and Ukraine – support a broad range of country-level actors and sectors (including government, civil society and the private sector) to work together for breakthrough results. The programmes have strengthened the capacity of and collaboration between leaders and institutions to respond to HIV/AIDS in a strategic and coordinated manner at all levels and across sectors. The programmes have also strengthened partnerships among United Nations organizations. In a number of countries, UNDP has provided technical support to national AIDS councils. In Burkina Faso, for example, UNDP supported the formulation of the national strategic plan, 2001-2005, and helped to organize a roundtable meeting on HIV/AIDS, during which donors pledged $94 million to finance the implementation of the plan.

Assisting countries to access resources

6. Along with other partners, UNDP is assisting countries in all regions to mobilize resources from the Global Fund to Fight AIDS, Tuberculosis and Malaria. In some 25 countries where no suitable local principal recipient is available, and under exceptional circumstances, UNDP has been requested to manage projects financed by the Global Fund. UNDP is also involved in capacity development of various organizations, particularly sub-recipients, and has organized capacity-building workshops relating to procurement for Global Fund projects.

Feminization of the epidemic

7. UNDP HIV/AIDS strategies promote a deep transformation of norms, values and practices, guided by the principles of gender equality, participation and human rights. UNDP assists governments, community organizations, civil society and the private sector to develop capacity to address the underlying causes of the epidemic, including gender inequality and power relations between men and women. In several countries, including Botswana, Cambodia, Ethiopia, Ghana, India, Lesotho, Nepal and Swaziland, UNDP has developed communication strategies to address gender relations that render women and girls vulnerable to infection, advocate for legal reforms to end discrimination against women, and acknowledge the critical role of women and girls in providing care and support. UNDP community capacity enhancement initiatives, through a process of community dialogue and self-reflection, have resulted in communities changing practices such as female genital

mutilation and wife sharing. UNDP development planning activities address gender dimensions of the epidemic in development plans and processes.

HIV/AIDS and food insecurity

8. UNDP has actively participated in the process of formulating the United Nations system response to the combined threat of HIV/AIDS and food insecurity, including through the High Level Committee for Programmes (HLCP) report Organizing the United Nations response to the triple threat of food insecurity, weakened capacity for governance and AIDS (CEB/2003/HLCP/CRP.27). UNDP is also active in the United Nations Regional Inter-Agency Coordination Support Office for the Special Envoy for Humanitarian Needs in Southern Africa. In addition, UNDP is launching the Southern Africa Capacity Initiative to meet the challenge of collapsing capacity in nine countries in Southern Africa (Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia and Zimbabwe).

Stigma, discrimination and marginalization

9. UNDP strategies and activities – including leadership development, community capacity enhancement and advocacy and communication – address issues of stigma, discrimination and marginalization. In Cambodia, Haiti, Nepal and Ukraine, leadership development programmes addressed discrimination against people living with HIV/AIDS. In Cambodia, the programme resulted in dialogue at district and local levels, examining norms and ostracizing of people living with HIV/AIDS. UNDP is working closely with the media and artists in a number of countries, including Botswana, Ethiopia, Ghana, India, Lesotho, South Africa and Swaziland, to generate a society-wide response that is gender-sensitive and respectful of the rights of people living with HIV/AIDS. In addition, these strategies fully involve people living with HIV/AIDS in the response to the epidemic and voice their concerns. Workshops with artists and the media have helped to generate positive and empowering images and messages in relation to women and people living with HIV/AIDS. In the Arab States, workshops have enrolled key media and entertainment personalities in mounting an effective response to HIV/AIDS, and have helped to break the silence surrounding the epidemic. UNDP is also using innovative advocacy and communication methodologies for legal reforms, in and formulating anti-discrimination legislation and addressing stigma and discrimination. A human rights initiative covering 10 African countries supported the development of legislation and associated administrative measures to prevent discrimination against people living with HIV/AIDS.

Leadership and political commitment

10. Through year-long leadership development programmes, UNDP, in partnership with other United Nations organizations, has supported the development of country-level leadership in a number of countries including Cambodia, Ethiopia, Ghana, Haiti, Malaysia, Nepal, Senegal, South Africa, Swaziland, and the Caribbean region.

The programmes have energized institutions and strengthened the capacity of governments, civil society and the private sector, as well as United Nations partners, to respond effectively to the epidemic and to scale up the national response. In addition, they have helped to build local partnerships and increase political commitment to address HIV/AIDS.

Multi-sectoral responses to HIV/AIDS

11. As the UNAIDS Convening Agency on Governance and Development Planning, UNDP – together with United Nations and other partners – is working to introduce innovative approaches for strengthening governance, development planning and systems to respond comprehensively to HIV/AIDS across sectors, and at national, sub-national and community levels. UNDP is also supporting national strategic planning and implementation, developing the capacity of civil society organizations in the area of HIV/AIDS and forging partnerships with artists and the media for society-wide responses to the epidemic. In Malawi, for example, responding to the debilitating 'capacity erosion' caused by HIV/AIDS mortality among civil servants, UNDP helped the Government to undertake an HIV/AIDS impact assessment study for the Public Service. The assessment covered the Malawi Police and the Ministries of Health and Population, Agriculture and Irrigation, Education, Science and Technology, and Water Development. As a result, the Government is considering setting up a system to track morbidity, mortality and absenteeism better in the public service, fast-track training and recruitment of replacement staff, adjust human resource management policies to ensure continued functioning of essential services, and step up workplace prevention and care activities. In several countries, including Burkina Faso, Burundi, Cameroon, Ethiopia and Madagascar, UNDP has supported the inclusion of HIV/AIDS in poverty reduction strategy papers. UNDP has also supported the creation of national AIDS councils in Botswana and Burkina Faso, among other countries.

Support to communities and vulnerable groups

12. In a number of countries, including Cambodia, Ethiopia, Malaysia, South Africa and Swaziland, UNDP community capacity enhancement initiatives have strengthened community capacity for action and social change and linked communities to national processes and responses. In Cambodia, the initiative has helped to lessen discrimination and domestic violence within communities, and resulted in the creation of a contribution fund to organize funerals for people who have died of AIDS. In South Africa, the initiative has facilitated open conversations on HIV/AIDS and, as a result, communities have provided care for AIDS orphans. In Swaziland, communities have supported people living with HIV/AIDS. The reflections and conversations have empowered communities to identify their challenges and find their own solutions in addressing HIV/AIDS. UNDP has also worked to develop leadership competencies of networks of people living with HIV/AIDS, and has worked with intravenous drug users in the Europe and Commonwealth of Independent States region.

Asia and Pacific region

13. UNDP has strengthened its response to the HIV/AIDS epidemic in the Asia and Pacific region. UNDP leadership for results programmes – which incorporate leadership development, community capacity enhancement, and work with arts and media – are being implemented in Cambodia, China, India, Malaysia and Nepal. The UNDP Regional Programme for South and North-East Asia is advocating a rights-based approach to HIV/AIDS and supporting the empowerment of women and people living with HIV/AIDS, in addition to addressing trafficking and promoting trans-border and regional collaboration. UNDP South-East Asia HIV and Development Programme is addressing issues of mobile populations.

National capacity to coordinate and implement responses to HIV/AIDS

14. UNDP leadership development programmes support a broad range of national actors across sectors – including government, civil society and the private sector – to work together to coordinate and implement responses to HIV/AIDS. This approach strengthens capacities for effective leadership and governance, strategic planning and implementation, large-scale programme management, and coalition-building. The programmes have also developed partnerships throughout the United Nations system to address HIV/AIDS.

Results-based management framework

15. UNDP HIV/AIDS service lines have been fully adopted in corporate instruments such as the strategic result frameworks, and are linked to the UNAIDS Unified Budget and Workplan and the United Nations System Strategic Plan on HIV/AIDS, 2001-2005. In addition, UNDP has harmonized the requirements of the Unified Budget and Workplan with the HIV/AIDS goal in the second multi-year funding framework, 2004-2007.

Scaling up national responses

16. UNDP leadership for results programmes adopt a large-scale, multi-dimensional strategic approach to create the enabling environment for countries to implement and scale up effective responses to HIV/AIDS. This approach moves away from discrete projects to a United Nations system response that aims at society-wide advocacy and action for halting the spread of HIV/AIDS.